



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO.1686-MC

DATE: June 28, 2016

TO: Iowa Medicaid Hospitals, Physicians, Dentists, Podiatrists, Optometrists, Opticians, Pharmacy, Home Health Agency, Independent Lab, Ambulance, Medical Supply Dealers, Clinics, Rural Health Clinics, Chiropractors, Audiologists, Skilled Nursing Facilities, Rehab Agency, Intermediate Care Facilities, Community Mental Health Center, Mental Hospitals, Community Based ICF/MR, Psychologists, Hearing Aid Dealers, Orthopedic Shoe Dealers, Ambulatory Surgical Centers, Certified Registered Nurse Anesthetists, Hospice, Clinical Social Workers, Federally Qualified Health Centers, Nursing Facility-Mental III and Advanced Register Nurse Practitioner Providers and Managed Care Organizations (MCOs)

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: Testing Period Extended for Medicare Crossover Claims-Coordination of Benefits (COB) with MCOs

EFFECTIVE: Immediately

The IA Health Link managed care program began on April 1, 2016.

Informational Letter [1619-MC](#)¹ announced that for dates of service on or after April 1, 2016, all Medicare crossover claims for MCO-enrolled members would become the responsibility of the member's MCO; including both claims from Medicare Advantage Plans and traditional Medicare. The MCOs must complete approximately three months of testing before Medicare crossover claims are approved to be sent automatically from Medicare to the MCOs for processing.

The automated crossover process had been anticipated to transition to the MCOs by the end of June 2016; however, this process will now transition at a later date which is to be determined. Until this process is transitioned, the IME will continue to receive claims from Medicare and will issue a denial for any COB crossovers for MCO-enrolled members. It will then be the provider's responsibility to submit the crossover claim to the appropriate MCO for reimbursement.

Once testing is successfully completed, crossover claims will be sent automatically by Medicare to the MCO. During this testing period all three MCOs will accept crossover claims

¹ https://dhs.iowa.gov/sites/default/files/1619-MC_MedicareCrossover%20ClaimsCoordinationofBenefits_%20ManagedCareOrgan_.pdf

in both standard electronic and paper formats, using the standard claim submission process outlined in their provider manuals.

An informational letter will be issued once it is confirmed that the crossover transition has been approved by the Centers for Medicare and Medicaid Services (CMS).

MCO specific materials are available on the [Managed Care Organization \(MCO\)-Specific Materials](#)² web page of the DHS website.

You may also contact the MCOs directly:

- Amerigroup Iowa, Inc. - Provider Services at 1-800-454-3730
- AmeriHealth Caritas Iowa, Inc. - Provider Services at 1-844-411-0579
- UnitedHealthcare Plan of the River Valley, Inc. - Provider Services at 1-888-650-3462

If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909 or email imeproviderservices@dhs.state.ia.us.

² <https://dhs.iowa.gov/ime/about/initiatives/MedicaidModernization/MCO-materials>